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Image# 15970164002

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

1 OHW OX	For Other Than An Au	ithorized Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	type 12FE4M5	
Ending Spending Acti	on Fund			
ADDRESS (number and street)	610 S. Boulevard			
	1			
Check if different than previously reported. (ACC)	Tampa		FL L	33606
2. FEC IDENTIFICATION N	UMBER ▼ C	ITY 🛦	STATE ▲	ZIP CODE ▲
C C00489856		IS THIS REPORT X NE	OR AM	ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:			20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:				(Non-Election Year Only)
April 15		or 20 (M4) Jul	20 (M7) Oct 2	20 (M10) X Jan 31 (YE)
Quarterly Report (July 15 Quarterly Report ((C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Report for the:	Convention (12	C) Special (1	2S)
January 31 Year-End Report (Floor	tion on) D / Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (3	0R) Special (30S)
Termination Repor (TER)	t .	tion on) = D / Y = Y = Y	in the State of
	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		M M / D D / 12 31	2014
I certify that I have examined t	his Report and to the best of	of my knowledge and bel	ief it is true, correct and	complete.
Type or Print Name of Treasur	er Nancy H. Watkins			
Signature of Treasurer Nan	ncy H. Watkins	[Electronically F	iled] Date 01	/ 30 / Y Y Y Y Y 2015
NOTE: Submission of false, error	neous, or incomplete informati	ion may subject the persor	signing this Report to th	e penalties of 2 U.S.C. §437g.
Office Use				FEC FORM 3X Rev. 12/2004
l Only I		1 1		

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **Ending Spending Action Fund** 25 2014 2014 Report Covering the Period: 11 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 3059.03 January 1, 2014 (b) Cash on Hand at 1242072.40 Beginning of Reporting Period..... 24015113.03 80929.79 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1323002.19 24018172.06 6(a) and 6(c) for Column B)..... 1071900.04 23767069.91 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 251102.15 251102.15 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Ending Spending Action Fur	ηd
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Report Covering the Period: From:	25 2014	To: 12 31 2014
I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
	77236.84	23910393.08
(i) Itemized (use Schedule A)	7 7	
(ii) Unitemized	0.00	1027.00
(iii) TOTAL (add	, , ,	
Lines 11(a)(i) and (ii)▶	77236.84	23911420.08
2.1100 TT(d)(i) dild (ii)		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	77236.84	23911420.08
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	, , , , , , , , , , , , , , , , , , , ,	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	3692.95	3692.95
. Refunds of Contributions Made		
to Federal Candidates and Other		400000 00
Political Committees	0.00	100000.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(IIOIII Schedule 110)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add To(a) and To(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	80929.79	24015113.03
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	80929.79	24015113.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(a) Allo	ng Expenditures: —— cated Federal/Non-Federal vity (from Schedule H4)		
(i)	Federal Share	0.00	0.00
(ii)	Non-Federal Share	0.00	0.00
(b) Oth	er Federal Operating		
-	endituresal Operating Expenditures	49891.94	371497.63
	d 21(a)(i), (a)(ii), and (b))▶	49891.94	371497.63
	s to Affiliated/Other Party	0.00	0.00
Contribution		0.00	0.00
and Oth	Candidates/Committees er Political Committees	0.00	160000.00
	dent Expenditures	372008.10	22585472.28
5. Coordina	nedule E) ated Party Expenditures C. §441a(d))		
(use Sc	nedule F)	0.00	0.00
6. Loan Re	epayments Made	0.00	0.00
 Loans N Refunds 	Madeof Contributions To:	0.00	0.00
(a) Indi Tha	viduals/Persons Other n Political Committees	650000.00	650100.00
(I) D.		0.00	0.00
	itical Party Committees er Political Committees	0.00	0.00
(su	ch as PACs)	0.00	0.00
(d) Tota	al Contribution Refunds		
` '	d Lines 28(a), (b), and (c))▶	650000.00	650100.00
9. Other D	isbursements	0.00	0.00
	Election Activity (2 U.S.C. §431(20)) cated Federal Election Activity		
(fro	m Schedule H6)		
(i) I	Federal Share	0.00	0.00
(ii)	"Levin" Share	0.00	0.00
(b) Fed	leral Election Activity Paid Entirely	0.00	0.00
(c) Tota	With Federal Funds	0.00	0.00
` '	nes 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
I Total Die	sbursements (add Lines 21(c), 22,		
	25, 26, 27, 28(d), 29 and 30(c))	1071900.04	23767069.91
0 7:15	Local Distance and	7	
	deral Disbursements t Line 21(a)(ii) and Line 30(a)(ii)		
	e 31)	1071900.04	23767069.91

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	77236.84	23911420.08
4. Total Contribution Refunds (from Line 28(d))	650000.00	650100.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-572763.16	23261320.08
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	49891.94	371497.63
7. Offsets to Operating Expenditures (from Line 15, page 3)	3692.95	3692.95
3. Net Operating Expenditures (subtract Line 37 from Line 36)	46198.99	367804.68

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

13

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Ending Spending Action Fund** Full Name (Last, First, Middle Initial) Ending Spending, Inc. Date of Receipt Mailing Address 815 Slaters Lane 2014 City Zip Code State Transaction ID: SA11AI.6258 VA Alexandria 22314 Amount of Each Receipt this Period FEC ID number of contributing C 9021.55 federal political committee. In-kind - legal fees Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 272498.79 Other (specify) Full Name (Last, First, Middle Initial) **B.** Ending Spending, Inc. Date of Receipt Mailing Address 815 Slaters Lane 12 31 2014 City State Zip Code Transaction ID: SA11AI.6263 VA Alexandria 22314 Amount of Each Receipt this Period FEC ID number of contributing 18215.29 federal political committee. In-kind - admin-travel/meetings Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 290714.08 Other (specify) Full Name (Last, First, Middle Initial) c. Paul Singer Date of Receipt Mailing Address 40 W. 57th Street, 30th Floor 11 25 2014 City Zip Code State Transaction ID: SA11AI.6239 NY New York 10019 Amount of Each Receipt this Period FEC ID number of contributing 50000.00 С federal political committee. Name of Employer Occupation Elliott Management Corp. c.e.o. Receipt For: Aggregate Year-to-Date ▼ Primary General 3200000.00 Other (specify) 77236.84 SUBTOTAL of Receipts This Page (optional)..... 77236.84 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 13 (check only one)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17				
	ly information copied from such Reports and St for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) Ending Spending Action Fund							
Δ.	Full Name (Last, First, Middle Initial) Neylan & Partners			Date of Receipt				
	Mailing Address 9401 Brookmay Court			12 21 2014 2014 21 12 2014 21 12 2014 21 12 2014 21 12 2014 21 21 21 21 21 21 21 21 21 21 21 21 21				
	City	State	Zip Code	Transaction ID : SA15.6261				
	Alexandria	VA	22309	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		3692.95				
	Name of Employer	Occupation	1	refund-media placement				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		3692.95					
— В.	Full Name (Last, First, Middle Initial)			Data of Descript				
О.	Mailing Address			Date of Receipt				
	City							
		Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.							
	Name of Employer	Occupation	1					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼			1				
	Other (specify)							
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt				
	Mailing Address			M = M / D = D / Y = Y = Y				
	City	State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		Amount of Latif necespt this Pellou				
Name of Employer Oc		Occupation	1					
	Receipt For: Primary General Other (specify) ▼ Aggrega		Year-to-Date ▼					
H	UBTOTAL of Receipts This Page (optional)			3692.95 3692.95				

17

SCHEDULE B (FEC Form 3X)			PAGE 8 OF 13	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orlook offly offe)		
	Detailed Summary Page		22 23 28a 28b	24 25 26 30b
Any information copied from such Reports and State	ments may not be sold or u			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
Full Name (Last, First, Middle Initial)				
A. DDC Advocacy			Date of Disburse	ement
Mailing Address 005 45th Oc. 1 ALM			M M / D	
Mailing Address 805 15th Street, N.W. Suite 300			12 1	9 2014
City	State Zip Code		Transaction IC) : SB21B.6257
Washington Purpose of Disbursement	DC 20005	1	Transaction in	7. 3B21B.0237
travel			Amount of Each	Disbursement this Period
Candidate Name		Category/		
		Туре		1865.73
Office Sought: House Disburse Senate	ement For: Primary General			
President	Other (specify)			
State: District:	, , , , ,			
Full Name (Last, First, Middle Initial)				
B. Ending Spending, Inc.			Date of Disburse	
Mailing Address 815 Slaters Lane			1	19 2014
City	State Zip Code VA 22314		Transaction ID	: SB21B.6259
Alexandria Purpose of Disbursement	VA 22314			
In-kind - legal fees			Amount of Each	Disbursement this Period
Candidate Name		Category/		9021.55
Office Sought: House Disburse	ement For:	Туре	,	302.100
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disburse	ement
C. Ending Spending, Inc.			M M / D	
Mailing Address 815 Slaters Lane				2014
City	State Zip Code			
Alexandria	VA 22314		Transaction ID) : SB21B.6264
Purpose of Disbursement In-kind - admin-travel/meetings				
Candidate Name		Amount of Each	Disbursement this Period	
Candidate Name		Category/ Type		18215.29
Office Sought: House Disburse	ement For:	1,750		
Senate	Primary General			
State: District:	Other (specify) ▼			
Side. Biodiot.				
SUBTOTAL of Disbursements This Page (optional).				29102.57
TOTAL This Period (last page this line number only	/)			

SCHEDULE B (FEC Form 3X)		Hee sees	arata cabadula/a\		FOR LINE NUMBER: PAGE 9 OF 13				
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(check only	/ one)	23	24	25	<u>26</u>
		Detailed	Summary Page	27	28a	28b	28c	29	30b
	ny information copied from such Reports and Statem								
or	for commercial purposes, other than using the name	ne and addr	ress of any politic	al committee to	solicit co	ntributions	from such	commit	tee.
	NAME OF COMMITTEE (In Full)								
\mathbb{I}	Ending Spending Action Fund								
_	Full Name (Last, First, Middle Initial)				_				
Α.	Robert Watkins & Company					f Disburse			
	Mailing Address 610 S. Boulevard				12		D / Y	2014	Y
	City	State	Zip Code		Trons	estion ID	: SB21B.62		
	Tampa	FL	33606		Irans	saction ib	: 3DZ I D.02	202	
	Purpose of Disbursement accounting services				Amoun	t of Each	Disburseme	ent this	Period
	Candidate Name			Category/				2073	4.37
	Office Sought: House Disbursen	nent For:		Туре		- 1	7		
		Primary	General						
		Other (spec	cify) 🔻						
_	State: District:								
R	Full Name (Last, First, Middle Initial)				Date o	f Disburse	ement		
٠.	The Bank of Tampa				M M	/ 0		Y	Υ
	Mailing Address P. O. Box 1				11		25	2014	
	City S Tampa	State FL	Zip Code 33601		Trans	saction ID	: SB21B.62	240	
	Purpose of Disbursement service charge			· · · ·	Amoun	t of Each	Disburseme	ent this	Period
	Candidate Name			Category/ Type				1	5.00
	Office Sought: House Disbursen	nent For:		1,700					
		Primary	General						
		Other (spec	cify) 🔻						
_	State: District: Full Name (Last, First, Middle Initial)								
C.	The Bank of Tampa				Date o	f Disburse	ement		
	·				M = M	/ D		Y Y	Υ
	Mailing Address P. O. Box 1				11	2	5	2014	
	•	State	Zip Code		Trans	saction ID	: SB21B.62	241	
	Tampa Purnose of Disbursement	FL	33601						
	Purpose of Disbursement service charge				Amous	t of Each	Disburseme	ant this	Dariad
	Candidate Name			Category/ Type	Amoun	i oi Each	DISDUISEME		0.00
	Office Sought: House Disbursen	nent For:				7	7		
		Primary	General						
		Other (spec	cify) 🔻						
	State: District:								
s	SUBTOTAL of Disbursements This Page (optional)			·····•			-	20769	9.37
1	OTAL This Period (last page this line number only)				L				

SCHEDULE B (FEC Form 3X)	Lies concrete cohodule(s)			PAGE 10 OF 13
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b	one) 22	24 25 26
	Detailed Summary Page	27	28a 28	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Ending Spending Action Fund				
Full Name (Last, First, Middle Initial)			D : (D:)	
A. The Bank of Tampa			Date of Disbu	rsement
Mailing Address P. O. Box 1			11	25 2014
	tate Zip Code FL 33601		Transaction	ID : SB21B.6243
Tampa Purpose of Disbursement	FL 33601			
service charge			Amount of Eac	ch Disbursement this Period
Candidate Name		Category/ Type		20.00
Office Sought: House Disbursem	ent For:	.,,,,	,	
	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
В.			Date of Disbur	rsement
Mailing Address			M = M / D)
City S	tate Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of Eac	ch Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disbursem				
	Primary ☐ General Other (specify) ▼			
State: District:	ошо: (ороону) ү			
Full Name (Last, First, Middle Initial)			5	
G.			Date of Disbu	
Mailing Address			M M / D) D / Y Y Y Y
City	tate Zip Code			
Purpose of Disbursement				
			Amount of Eac	ch Disbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disbursem				
	Primary ☐ General Other (specify) ▼			
State: District:	Outor (Specify)			
1				20.00
SUBTOTAL of Disbursements This Page (optional)		······		20.00
TOTAL This Period (last page this line number only).				49891.94

SCHEDULE B (FEC Form 3X)	Has approved a 1 1 1 1 1 1			PAGE 11 OF 13
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	21b 27	22 23 X 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and Stater or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Ending Spending Action Fund				
		· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) A. Kojaian Management Corp.			Date of Disbursem	nent
			M M / D D	
Mailing Address 39400 Woodward Avenue Suite 250			11 25	2014
,	State Zip Code MI 48304		Transaction ID:	SB28A.6244
Bloomfield Hills Purpose of Disbursement	MI 48304			
contribution refund			Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		50000.00
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)			Data of Dishurasm	ant.
B. McKinley Associates, Inc.			Date of Disbursem	
Mailing Address 320 N. Main Street Suite 200			11 25	2014
City S Ann Arbor	State Zip Code MI 48104		Transaction ID :	SB28A.6242
Purpose of Disbursement contribution refund			Amount of Each D	sisbursement this Period
Candidate Name		Category/ Type		600000.00
	nent For: Primary General Other (specify)	.,,,,,	,	,
State: District: Full Name (Last, First, Middle Initial)				
c.			Date of Disbursem	
Mailing Address			M M / D D	/
City	State Zip Code			
Purpose of Disbursement				
Candidate Name		Category/ Type		isbursement this Period
Office Sought: House Disburser	ment For: Primary General Other (specify) ▼			
CURTOTAL of Dishumanus This Boss (a ")				650000.00
SUBTOTAL of Disbursements This Page (optional)		······		00000.00
TOTAL This Period (last page this line number only)				650000.00

S

Nancy H. Watkins

Signature

	HEDULE E (FEC Form 3X)		
TΕ	MIZED INDEPENDENT EXPENDITURES		PAGE 12 OF 13 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
E	nding Spending Action Fund		C C00489856
Ch	eck if 24-hour report 48-hour report New report Amends re	eport filed o	on M = M / D = D / Y = Y = Y
	Full Name of Payee Basswood Research		Date of Public Distribution/Dissemination
		11 30 7 2014	
	Mailing Address 4550 Montgomery Avenue		Amount
	North Tower, Suite 906		
	City State Zip Code Bethesda MD 20814		ransaction ID : SE.6245 Date of Disbursement or Obligation
	Purpose of Expenditure research Category/ Type		11 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support	t Office	Sought: House District:
	Mary L. Landrieu Oppose		President State: LA
	Calendar Year-To-Date Per Election for Office Sought	2014	Sement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Madison McQueen LLC		12 02 7 2014
	Mailing Address 135 Richmond Street		Amount
	City State Zip Code		15000.00
	La Segundo CA 90245	Т	ransaction ID : SE.6254 Date of Disbursement or Obligation
	Purpose of Expenditure media production Category/ Type		12 02 2014
	Name of Federal Candidate Support	t Office	Sought: House District:
	Mary L. Landrieu		President State: LA
	Calendar Year-To-Date Per Election for Office Sought	Disbur 2014	sement For: Primary General Other (specify) ► Runoff
	a) SUBTOTAL of Itemized Independent Expenditures	····· >	27660.00
	b) SUBTOTAL of Unitemized Independent Expenditures	····· þ	1 7 1 7 1 7
	c) TOTAL Independent Expenditures	······ >	
	Under penalty of perjury I certify that the independent expenditures reported herein we with, or at the request or suggestion of, any candidate or authorized committee or agerearty committee) any political party committee or its agent.		

[Electronically Filed]

2015

30

01

Date

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES			PAGE 13 OF 13
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
Ending Spending Action Fund			C IDENTIFICATION NUMBER ▼
		C	C00489856
Check if 24-hour report 48-hour report New report	t Amends repor	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee		Date of P	ublic Distribution/Dissemination
McCarthy Hennings Media, Inc.		M N	30 / 2014
Mailing Address 1850 M Street, N.W., #235		Amount	
City State Z	Zip Code		16998.10
Washington DC 2	20004		n ID : SE.6247 isbursement or Obligation
Purpose of Expenditure media production	Category/ Type	M 12	
Name of Federal Candidate	Support	Office Sought:	House District:
Mary L. Landrieu	X Oppose	President	Senate State: LA
Calendar Year-To-Date Per Election for Office Sought	1206320.26	Disbursement Fo	or: Primary General (specify) ► Runoff
Full Name of Payee			Public Distribution/Dissemination
Mentzer Media Services, Inc.		M = N	M / D D / Y D Y D Y
Mailing Address		11	30 2014
600 Fairmount Avenue, #306		Amount	
City State Z	Zip Code		327350.00
Towson MD	21286		on ID : SE.6246 Disbursement or Obligation
Purpose of Expenditure media placement	Category/ Type	11	
Name of Federal Candidate	Support	Office Sought:	House District:
Mary L. Landrieu	Oppose	President	Senate State: LA
Calendar Year-To-Date		Disbursement Fo	or: Primary General
Per Election for Office Sought	1176662.16	2014 X Other	r (specify) ▶Runoff
(a) SUBTOTAL of Itemized Independent Expenditures		·	344348.10
(b) SUBTOTAL of Unitemized Independent Expenditures			
			4
(c) TOTAL Independent Expenditures		•	372008.10
Under penalty of perjury I certify that the independent expenditures rewith, or at the request or suggestion of, any candidate or authorized of party committee) any political party committee or its agent.			
Nancy H. Watkins [Electronics	ally Filedl	M M / D	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	01	30 2015